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| <b>Issue Classification</b><br> | <b>Application/Control No.</b><br>10564875 | <b>Applicant(s)/Patent Under Reexamination</b><br>YUKAWA, SHIGEO |
|   | <b>Examiner</b><br>David J Joy             | <b>Art Unit</b><br>1794  |

| ORIGINAL           |                                   |          |     |  |  | INTERNATIONAL CLASSIFICATION |   |   |   |                     |             |  |  |  |  |  |  |  |
|--------------------|-----------------------------------|----------|-----|--|--|------------------------------|---|---|---|---------------------|-------------|--|--|--|--|--|--|--|
| CLASS              |                                   | SUBCLASS |     |  |  | CLAIMED                      |   |   |   |                     | NON-CLAIMED |  |  |  |  |  |  |  |
| 503                |                                   | 227      |     |  |  | B                            | 4 | 1 | M | 5 / 20 (2006.01.01) |             |  |  |  |  |  |  |  |
| CROSS REFERENCE(S) |                                   |          |     |  |  | B                            | 4 | 1 | M | 5 / 24 (2006.01.01) |             |  |  |  |  |  |  |  |
|                    |                                   |          |     |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
| CLASS              | SUBCLASS (ONE SUBCLASS PER BLOCK) |          |     |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
| 283                | 72                                | 81       | 103 |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
| 428                | 916                               |          |     |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
| 427                | 146                               | 152      |     |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |     |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |     |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |     |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |     |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |     |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |     |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |     |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |     |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |     |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |     |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |
|                    |                                   |          |     |  |  |                              |   |   |   |                     |             |  |  |  |  |  |  |  |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|---|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| Final   | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
| 1   | 1        | -     | 17       |       |          |       |          |       |          |       |          |       |          |       |          |
| 2   | 2        | -     | 18       |       |          |       |          |       |          |       |          |       |          |       |          |
| -   | 3        | -     | 19       |       |          |       |          |       |          |       |          |       |          |       |          |
| 3   | 4        | 10    | 20       |       |          |       |          |       |          |       |          |       |          |       |          |
| 4   | 5        | 14    | 21       |       |          |       |          |       |          |       |          |       |          |       |          |
| 5   | 6        | -     | 22       |       |          |       |          |       |          |       |          |       |          |       |          |
| 6   | 7        | -     | 23       |       |          |       |          |       |          |       |          |       |          |       |          |
| 7   | 8        | -     | 24       |       |          |       |          |       |          |       |          |       |          |       |          |
| 8   | 9        | -     | 25       |       |          |       |          |       |          |       |          |       |          |       |          |
| 9   | 10       | -     | 28       |       |          |       |          |       |          |       |          |       |          |       |          |
| 11  | 11       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 12  | 12       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 13  | 13       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| -   | 14       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| -   | 15       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| -   | 16       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |

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| /David J Joy/<br>Examiner, Art Unit 1794<br><br>(Assistant Examiner)                     | 12/17/2009<br><br>(Date) | <b>Total Claims Allowed:</b><br><br>14 |                             |
| /MARK RUTHKOSKY/<br>Supervisory Patent Examiner, Art Unit 1794<br><br>(Primary Examiner) | 12/22/2009<br><br>(Date) | O. G. Print Claim(s)<br><br>1          | O. G. Print Figure<br><br>4 |